CERTIFICATE OF COMPLIANCE OF ILLINOIS COMPILED STATUTES, CH. 65, SEC. 11-42.1-1

The undersigned, upon being first duly sworn, hereby certifies to the Cit
of St. Charles, Kane and DuPage Counties, Illinois, that
(bidder) is not currently delinquent in the
payment of any tax administered by or owed to the Illinois Department of Revenue, or
otherwise in default upon any such tax as defined under Ch. 65, Sec. 11-42.1-1,
Illinois Compiled Statutes.
Name of Bidder
Ву:
Otata as
State of), ss.
County of)
Subscribed and sworn to before me this day
of
Notary Public

CERTIFICATE OF NON-DISQUALIFICATION UNDER ILLINOIS COMPILED STATUTES, CH. 720, SEC. 33E-11

The undersigned, upon being first duly s	worn, hereby certifies to the City of St. Charles
Kane and DuPage Counties, Illinois, that	
(bidder) is not be	arred from contracting with any
unit of State or local government, as a res	sult of a violation of Ch. 720, Sec. 33E-11 of the
Illinois Compiled Statutes.	
	Name of Bidder
	D
	Ву:
State of	
State of), ss.	
County of)	
Subscribed and sworn to before me this day	
of,	
Notary Public	

NOTE TO BIDDER: Anyone who makes a false statement, material to this Certification, commits a Class 3 Felony under Illinois Compiled Statutes, Ch. 720, Sec. 33E-11 (b).

CERTIFICATE OF COMPLIANCE WITH SAFETY STANDARDS

The undersigned, upon beir	ng first duly sworn, hereby certifies to the Cit
of St. Charles, Kane and DuPage Countie	es, Illinois, that
(bidder) shall co	mply with all local, state and
federal safety standards.	
	Name of Bidder
	Name of blader
	By:
State of),	
county of)	
Subscribed and sworn to	
before me this day of	
	
Notary Public	
i total y i ubilo	

CERTIFICATE OF COMPLIANCE WITH PUBLIC ACT 87-1257 OF THE ILLINOIS HUMAN RIGHTS ACT

Name of Bidder By: State of, ss. County of) Subscribed and sworn to before me this day of	i ne undersigned, upon being first	t duly sworn, nereby certifies to the City of St
amended by Section 2-105, Public Act 87-1257 in relation to employment and huma rights. Name of Bidder By: State of, ss. County of day of, day of	Charles, Kane and DuPage Counties, Illi	nois, that
State of	(bidder) complies v	with the Illinois Human Rights Act as
Name of Bidder By: State of, ss. County of) Subscribed and sworn to before me this day of	amended by Section 2-105, Public Act 8	7-1257 in relation to employment and huma
State of), ss. County of) Subscribed and sworn to before me this day of	rights.	
State of), ss. County of) Subscribed and sworn to before me this day of		
State of), ss. County of) Subscribed and sworn to before me this day of		
State of), ss. County of) Subscribed and sworn to before me this day of		
State of), ss. County of) Subscribed and sworn to before me this day of		
State of), ss. County of) Subscribed and sworn to before me this day of		
State of), ss. County of) Subscribed and sworn to before me this day of		Name of Bidder
State of), ss. County of) Subscribed and sworn to before me this day of		
State of), ss. County of) Subscribed and sworn to before me this day of		
Subscribed and sworn to before me this day of		Ву:
Subscribed and sworn to before me this day of		
County of) Subscribed and sworn to before me this day of	State of),	
before me this day of	County of)	
of	Subscribed and sworn to	
Notany Public		
Notany Public		
	Notary Public	

CERTIFICATE OF COMPLIANCE WITH PREVAILING WAGE RATE ACT

The undersigned, upon being first duly sworn, hereby certifies to the City of St. Charles, Kane and DuPage Counties, Illinois, that all work under this contract shall comply with the Illinois Prevailing Wage Act, 820 ILCS 130/.01, et. seq, (the "Act") and current City ordinance, to the extent required by law. Contractors shall submit monthly certified payroll records to the City.

	•	Name	of	Contractor
	Ву:_			
State of),				
SS. County of				
Subscribed and sworn to before me thisday of				
Notary Public				
/cjb Bidders Section II				

CERTIFICATE OF COMPLIANCE WITH SALES TAX FORM

The undersigned, upon being	first duly sworn, hereby certifies to the City		
of St. Charles, Kane and DuPage Counties,	Illinois, that		
(bidder) shall comply with General Conditions, Paragraph 1.G.			
and the Illinois Department of Revenue tax	exempt form.		
	Name of Bidder		
	By:		
State of), ss.			
County of)			
Subscribed and sworn to before me this day			
of			
Notary Public			
JH:cb			

Bidders Section II



Illinois Department of Revenue

Office of Local Government Services Sales Tax Exemption Section, 3-520 101 W. Jefferson Street Springfield, IL 62702 217 782-8881

January 2, 2015

CITY OF ST CHARLES DIRECTOR OF FINANCE TWO EAST MAIN ST ST CHARLES IL 60174

Effective January 1, 2015, we have renewed your governmental exemption from payment of the Retailers' Occupation Tax, the Service Occupation Tax (both state and local), the Use Tax, and the Service Use Tax, as required by Illinois law.

We have issued the following new tax exemption identification number:

E9996-0680-07

CITY OF ST CHARLES

OI

ST CHARLES, IL

The terms and conditions governing use of your exemption number remain unchanged.

Office of Local Government Services
Illinois Department of Revenue

Issued To:

Company:

Date Issued:

Project:

Dates Valid:

Christopher A. Minick, Director of Finance

STS-70 (R-2/98) SH\$493-76522(98) IL10492033294 10-0001417



City of St. Charles Certificate of Insurance Requirements

Contractors shall carry all insurance coverage required by law. In addition, the Contractor shall carry, at its own expense, at least the following insurance coverage with a duly licensed and registered insurance company in the State of Illinois having a minimum A.M. Best rating of A-VI:

- (a) Workers' Compensation & Occupational Diseases Insurance Statutory amount for Illinois
- (b) General Liability Insurance:
 - 1) Bodily injury, with limits of not less than \$1,000,000 each occurrence/ \$2,000,000 aggregate;
 - 2) Property damage, with limits of not less than \$1,000,000 each occurrence/ \$2,000,000 aggregate;
 - 3) Contractual insurance broad form, with limits of not less than \$1,000,000 each occurrence/\$2,000,000 aggregate.
- (c) Automotive Liability Insurance:
 - 1) \$1,000,000 each occurrence/ \$2,000,000 aggregate;
 - Property damage, with limits of not less than \$1,000,000 each occurrence/ \$2,000,000 aggregate. Property damage insurance coverage shall include non-owned, hired, leased, or rented vehicles, as well as owned vehicles.
- (d) Umbrella liability \$5,000,000.



- (e) Contractor's insurance policy shall name City as an additional insured on the General Liability, Automotive Liability and Excess Liability insurance policies. The insurance coverage shall be written with insurance companies acceptable to City. All insurance premiums shall be paid without cost to City. The Contractor shall furnish to City a Certificate of Insurance attesting to the respective insurance coverage for the full contract term. Contractor shall submit satisfactory proof of insurance simultaneously with the execution of the contract.
- (f) All insurance policies shall provide that the City shall receive written notice of cancellation or reduction in coverage of any insurance policy thirty (30) days to the effective date of cancellation.

SECTIONS III-IV 2016-2017 SPECIFICATIONS & PROPOSAL FOR HAULING

The primary purpose of this bid is to provide hauling for the City of St Charles, regardless of product being hauled. Frequency and timing of hauling are dependent upon the work schedules of the Public Works Department or emergency work. All bidders are asked to list hourly rates to include Driver/operator and vehicles. The winning bidder is required to follow State of Illinois Prevailing Wage laws.

VEHICLES/EQUIPMENT (INCLUDING DRIVER/OPERATOR)

	STRAIGHT TIME	<u>OVERTIME</u>			
TRACTOR/LOWBOY TRAILER	<u>\$/hr.</u>	<u>\$ /hr.</u>			
SEMI TRACTOR/20 YD. DUMP TRAILER	<u>\$/hr.</u>	<u>\$ /hr.</u>			
6 WHEEL DUMP/8 YD.	<u>\$/hr.</u>	<u>\$ /hr.</u>			
	he right to award th	charges averaging the best price is bid in the best interest of the			
All tipping fees will be the responsibility of the City of St. Charles. The City will pay tipping fees as billed by the applicable landfill operator.					
		COMPANY			
		ADDRESS			
		CITY, STATE, ZIP			
		TELEPHONE			
		SIGNATURE OF AUTHORIZED AGENT			

ALL PRICES ARE FIRM THROUGH APRIL 30, 2017.

JH/TB:cjb
Bids\Services\2017 HAULING Spec